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NO. 1153 P. 2

JUL 1 2 2010

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE 10 JUL 14 PM 4: 02

Applicant:

Matthew Patricelli, et al.

Title:

PROTEIN PROFILING PLATFORM

Serial No.:

10/087,602

Filing Date:

03/01/2002

Examiner:

Counts, Gary W.

Art Unit:

1641

Confirmation

7925

Number:

CERTIFICATE OF FACSIMILE TRANSMISSION
Thereby certify that this paper is being facsimile transmited to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.

Stephen E. Reiter
(Printed Name)

(Signature)

July 12, 2010
(Date of Deposit)

NOTIFICATION OF LOSS OF ENTITLEMENT TO SMALL ENTITY STATUS AND PAYMENT OF DEFICIENCY OWED

Mail Stop M Correspondence Director of the USPTO P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. §1.27(g)(2), Applicant hereby states that small entity status in the above-identified patent is no longer appropriate. Fees paid presently and henceforth will be paid based on large entity status.

- <u>Separate Submission required for each patent:</u> Applicant is submitting a deficiency owed for the above-captioned application.
- Calculation and Payment of deficiency owed:
- 1. Applicant paid the Issue Fee on November 10, 2006 in the small entity amount of \$700.00. Therefore, the amount owed is \$810.00.

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OFFICE OF PETITIONS Atty. Dkt. No. 063391-0302

An itemization of the deficiency payments, as required by 37 C.F.R. §1.28(c)(2)(ii) is shown below:

(A) Type of fee paid erroneously as small entity	(B1) Small Entity amount paid	(B2) Date of payment	(C) Deficiency amount owed
Issue Fee	\$700.00	11/10/2006	\$810.00

(D) The total deficiency payment owed:

\$810.00

A credit card payment form in the amount of \$810.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please contact the undersigned with any additional questions.

Respectfully submitted,

Date

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Ву

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